



## Senate

General Assembly

**File No. 393**

*January Session, 2003*

Substitute Senate Bill No. 845

*Senate, April 16, 2003*

The Committee on Public Health reported through SEN. MURPHY of the 16th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

### **AN ACT CONCERNING MANDATORY OVERTIME IN HEALTH CARE FACILITIES.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2003*) (a) As used in this  
2 section:

3 (1) "Employee" means an individual employed by a hospital who is  
4 involved in direct patient care services and who receives an hourly  
5 wage; and

6 (2) "Hospital" shall have the same meaning as set forth in section  
7 19a-490 of the general statutes.

8 (b) No hospital may require an employee to work in excess of a  
9 predetermined scheduled work shift, provided such scheduled work  
10 shift is determined and promulgated not less than forty-eight hours  
11 prior to the commencement of such scheduled work shift. Any  
12 employee may volunteer or agree to work hours in addition to such

13 scheduled work shift but the refusal by an employee to accept such  
14 additional hours shall not be grounds for discrimination, dismissal,  
15 discharge or any other penalty or employment decision adverse to the  
16 employee.

17 (c) The provisions of this section shall not apply: (1) To any  
18 employee participating in a surgical procedure until such procedure is  
19 completed; (2) to any employee working in a critical care unit until  
20 such employee is relieved by another employee who is commencing a  
21 scheduled work shift; (3) in the case of a public health emergency; or  
22 (4) in the case of an institutional emergency, including, but not limited  
23 to, adverse weather conditions, catastrophe or widespread illness, that  
24 in the opinion of the hospital administrator will significantly reduce  
25 the number of employees available for a scheduled work shift,  
26 provided the hospital administrator has made a good faith effort to  
27 mitigate the impact of such institutional emergency on the availability  
28 of employees, unless a collective bargaining agreement provides  
29 otherwise.

This act shall take effect as follows:	
Section 1	October 1, 2003

**LAB**      *Joint Favorable C/R*

PH

**PH**      *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

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**OFA Fiscal Note**

**State Impact:** None

**Municipal Impact:** None

**Explanation**

The bill will result in no additional cost to the state. The bill's provisions on overtime restrictions will not impact the state facilities identified due to current practice (and collective bargaining provisions). In addition, it is anticipated that any activity incurred by the Department of Labor due to the overtime provision and resulting complaints, will be minimal and not require additional resources.

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**OLR Bill Analysis**

sSB 845

**AN ACT CONCERNING MANDATORY OVERTIME IN HEALTH CARE FACILITIES****SUMMARY:**

This bill bars a hospital from requiring its patient-care employees to work more hours than established in a predetermined scheduled work shift. The predetermined shift must be set at least 48 hours before it starts. The bill provides some exceptions to this, such as public health emergencies.

EFFECTIVE DATE: October 1, 2003

**PROTECTIONS**

Under the bill, any employee may volunteer or agree to work additional hours. But the refusal to accept additional hours may not be grounds for discrimination, dismissal, discharge, or any other penalty or employment decision that is adverse to the employee.

**SCOPE OF THE BILL**

The bill protects people employed by a hospital involved in direct patient-care services and who receive hourly wages. Hospitals include establishments for the lodging, care, and treatment of people suffering from disease or other abnormal physical or mental conditions and includes inpatient psychiatric services in general hospitals.

**EXEMPTIONS**

The bill exempts (1) any employee participating in a surgical procedure until the procedure is completed; (2) any employee working in a critical care unit until he is relieved by another employee beginning a scheduled shift; (3) public health emergency situations; and (4) institutional emergency situations, including adverse weather conditions, catastrophe, or widespread illness that in the hospital administrator's opinion will significantly reduce the number of

employees available for a scheduled work shift. In this last situation, the administrator must make a good faith effort to mitigate the emergency's effect on the availability of employees, unless a collective bargaining agreement provides otherwise.

**COMMITTEE ACTION**

## Labor and Public Employees Committee

Joint Favorable Change of Reference

Yea 6      Nay 0

## Public Health Committee

Joint Favorable Substitute

Yea 19      Nay 2